

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	B-H	60245	9-14-98
O.I.P.E. CLASSIFIER			9-11-98
FORMALITY REVIEW		71622	9-18-98

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) Canceled      A ..... Appeal  
 + ..... Restricted      O ..... Objected

Claim	Final	Original	Date
1		9	
2		7	
3		10	
4		23	
5		12	
6		02	
7		03	
8		04	
9	✓	-	-
10	✓	-	-
11	✓	-	-
12	✓	-	-
13	✓	-	-
14	✓	-	-
15	✓	-	-
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33	✓	-	-
34	✓	-	-
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36	✓	-	-
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47	✓	-	-
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49	✓	-	-
50	✓	-	-

Claim	Final	Original	Date
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Claim	Final	Original	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

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